

REDMAN VAN & STORAGE Co.

291475

2571 West 2590 South, Salt Lake City, Utah (801) 972-4420 855 South 500 West, Salt Lake City, Utah (801) 328-8581
E-16 Freeport Center, Clearfield, Utah (801) 776-2645

291475

TIME STARTED

TIME

DATE	TIME ORDERED	C.O.D.	CHARGE	PER	ORDER TAKEN BY	ORDER DATE	EST. COST	NO. ROOMS
11-26-14	8-5	NO CHARGE			JACIE	11-25-14		1
INSURANCE	FLIGHT/STAIRS	PACKING	RANGE	REFRIG.	AUTO WASHER	AUTO DRYER	PIANO	FREEZER
REG								
								50

OMNICOMM

SHIP FROM

2475 WASHINGTON BLVD
OGDEN, UT 84401

SHIP TO

REDMAN VAN & STG MAIN OFFICE

2571 W. 2590 SOUTH
SALT LAKE CITY, 84119

JAYDEN

877-878-2743

ATTN:

972-4420

STORAGE LOT #

ALL OUT

TYPE

EITHER

NUMBER OF PERSONNEL 2

BILL TO

STI 2750
XW062300

0000

CALL ext 315

TIME

VOICEMAIL ☐ PERSON ☐

SPECIAL INSTRUCTIONS:

PICK UP HP PRINTER.
MUST VERIFY SERIAL NUMBER.
PLEASE COMPLETE ATTACHED FORM AND
HAVE CUSTOMER SIGN

EST.	PACK	NO. DEL	NEW	USED	NAME	IN	TIME	OUT
	DRUM							
	1.5							
	3.0							
	4.5							
	6.0							
	MIRROR							
	W. ROBE							
	TAPE							
	SNGL.							
	DBL.							
	KING QUEEN							

TOTAL PACKING

★★ IMPORTANT LIABILITY INFORMATION ★★

THE RESPONSIBILITY OF THIS COMPANY FOR ANY PIECE PACKAGE OR ITS CONTENTS IS LIMITED TO 60 (SIXTY) CENTS PER POUND PER ARTICLE. A HIGHER VALUE MAY BE DECLARED BELOW AND A HIGHER RATE FOR ADDITIONAL PROTECTION WILL BE ASSESSED. FAILURE TO DECLARE HIGHER VALUE ASSUMES 60¢ PER LB. LIABILITY.

SHIPMENT IS RELEASED AT 60¢ PER POUND X CUSTOMER SIG.

DECLARED VALUE IS GREATER THAN 60¢ PER POUND.

CUSTOMER REQUESTS:

DEPRECIATED VALUE PROTECTION FOR \$

REPLACEMENT COST PROTECTION FOR \$

DECLARED VALUE MUST EQUAL COST OF ENTIRE SHIPMENT

NOTE:

ADDITIONAL PREMIUM MUST BE PAID TO COVER A HIGHER VALUE DECLARED. AMOUNTS DECLARED WITHOUT PREMIUM PAYMENT WILL BE INVALID.

CUSTOMER SIGNATURE

PRINT NAME MATTHEW FORSBERG

GOODS RECEIVED IN GOOD CONDITION EXCEPT AS NOTED.
CUSTOMER SIGNATURE ACKNOWLEDGES TERMS AND CONDITIONS ON REVERSE SIDE.

TIME ARRIVED	CUST. INITIAL
11:00 A.M.	MA
TIME DEPART	CUST. INITIAL
1:00 P.M.	MA

NON PRODUCTIVE TIME (DRIVER MUST EXPLAIN)

COMPUTATION OF CHARGES	NO. OF MEN	REG. HRS.	O.T. HOURS	REG. RATE PER HOUR	O.T. RATE PER HOUR	Totals
MAN & VAN						
EXTRA MEN						
PACKING COSTS						
ADDITIONAL PROTECTION CHARGES						
STORAGE CHARGES (PER)						
OTHER (PLEASE EXPLAIN)						
TOTAL COST						

TERMS ARE PREPAID OR UPON COMPLETION OF MOVE. CREDIT ARRANGEMENTS MUST BE APPROVED IN ADVANCE. CREDIT TERMS ARE NET 7 DAYS OF RECEIPT OF INVOICE. INTEREST WILL BE BILLED AT 1 1/2% PER MONTH ON PAST DUE ACCOUNTS. IN THE EVENT LEGAL ACTION IS NECESSARY TO COLLECT PAST DUE AMOUNTS, CUSTOMER AGREES TO PAY ATTORNEY FEES, INTEREST AND COLLECTION COSTS.

BILL OF LADING & FREIGHT BILL

US DOT 1278850 MC 497943

**CONTRACT
NUMBER**

XW062300

TARIFF/SECTION	BOOKER CODE/ ASSIST CODE	ESTIMATOR	TOTAL ESTIMATED* CHARGES FOR SHIPMENT	VEHICLE NO.	AGREED SERV. DATES OR PERIOD OF TIME	ACTUAL PICKUP DATE
N30600					PUD DEL 11/26/14-11/28/14	

SHIP FROM	SHIPPER	ST.			NOTIFY/PHONE	
	CITY/ST.	2475 WASHINGTON BLV	ZIP			
	COUNTY	UT	84401		JAYDEN	877 678 2743
						EXT 5555
SHIP TO	SHIPPER	ST.			NOTIFY/PHONE	
	CITY/ST.	1300 THORNDALE AVE	ZIP			
	COUNTY	IL	60007		COLEEN	847 750 9350

RECEIVED, SUBJECT TO CLASSIFICATIONS, TARIFFS, RULES AND REGULATIONS
INCLUDING ALL TERMS PRINTED OR STAMPED HEREON OR ON THE REVERSE SIDE
HEREOF IN EFFECT ON THE DATE OF ISSUE OF THIS BILL OF LADING.

*CHARGES STATED HEREIN ARE ESTIMATES ONLY. ACTUAL CHARGES ARE BASED UPON THE APPLICABLE TARIFF.

B I L L	T O	NAME	HEWLETT PACKARD (HP) - PO BOX 101326	ADDR		P.O./
		ATTN:				NO.

SPECIAL INSTRUCTIONS

BILLING INSTRUCTIONS: Charges payable by certified check or cashier's check (per tariff) made payable to STI at

☐ Origin ☐ Before delivery ☐ Carrier shall bill above party

PC CNT 1
1 SM PRINTER
CUST & DRIVER MUST VERIFY, CHECK SERIAL# & SIGN SH
EADSHSEET
USED: COMPUTERS - PC, MAINFRAMES: PACKAGING LOOSE
INSPECT FRT PRIOR TO LOADING PLS CONTACT ASAP IF
ANY EXCEP. ALL CHARGES AND ADD'L SERVICES MUST BE
APPROVED PRIOR 24 HR PRECALL ORIG/DEST!!
NOTIFY BKR IF NO CONTACT MUST BRNG 1
KID SW BW CORNERS INSERTS
SN# SHEET MUST BE FAXED OR EMAILED TO BOOKER W/IN
24HRS FAX# 925-771-1050 / TEAMSTIC@VALLEYREL
CATION.COM
DRIVER MUST CALL VALLEY FROM ORG TO CONFIRM PIECE
PACKED MUST INCLUDE MAKE/MODEL/SERIAL NUMBER
SPECIAL INSTRUCTIONS CONTINUED ON NEXT PAGE

WEIGHT		ORIGINAL	REWEIGH
GROSS			
TARE			
NET			

Shipper: The tare weight of the vehicle (including the shipments on board) must be entered on the line prior to loading your shipment on the vehicle.

Shipment consists solely of containers or machinery and shipper certifies the total weight of the shipment to be: _____ pounds.

Shipper Signature X

SHIPPER'S SIGNATURE FOR SPECIAL SERVICES

X Expedited service ordered by shipper. Deliver on or before _____

Selected delivery date service ordered by shipper

X Deliver on or before _____ DATE AGREED WEIGHT _____

X Shipment completely occupied a _____ cu. ft. vehicle

X Exclusive use of a _____ cu. ft. vehicle ordered

X Space occupied _____ cu. ft.
 (@ 7lbs./cu. ft.)

VALUATION STATEMENT

This shipment is released to Carrier upon the terms and conditions and limitation of liability contained in the applicable tariff, unless otherwise noted herein by an authorized Carrier representative. If the shipper desires to increase Carrier's liability, the shipper must contact the Carrier representative that registered the shipment with Carrier and obtain Carrier's approval for such increased liability. CARRIER'S DRIVER IS NOT AUTHORIZED TO CHANGE THE TERMS AND CONDITIONS, INCLUDING WITHOUT LIMITATION CARRIER'S LIABILITY, APPLICABLE TO THE SHIPMENT. Carrier shall have no liability above the released value contained in the tariff if Carrier has not agreed in advance to such increased liability and the shipper has not paid the increased rate applicable thereto.

DATE	PTS ID/INITIALS	LOCATION	TIME

ORIG: Arrive: _____ Depart: _____ Van Crew(#): _____ Initials _____
 DEST: Arrive: _____ Depart: _____ Van Crew(#): _____ Initials _____

ORIG. NAME	PHONE #	DATE
DEST. NAME	PHONE #	DATE
KKR-	PHONE #	DATE

TOTAL **PIECE COUNT** PER ATTACHED
DESCRIPTIVE INVENTORY IS:

**MUST BE COMPLETED BY FIRST PICKUP
AGENT OR HAULER**

USED BY 1st _____ _____ _____	PIECE COUNT _____ _____ _____	AUTHORIZED PICK UP CODE _____ _____	CONTRACT NO. _____ _____
-------------------------------------	-------------------------------------	---	-----------------------------

UILED BY 1st _____ or set off _____ station & code _____	CODE _____ DATE _____	APU DATE _____	PAYMENT RECEIVED	NET
UILED BY 2nd _____ or set off _____ station & code _____	CODE _____ DATE _____	BY _____ AMOUNT _____	CK # _____ BANK NAME _____ BANK ADDRESS _____	OTHER AC
UILED BY 3rd _____ or set off _____ station & code _____	CODE _____ DATE _____	DATE _____		
UILED BY 4th _____ or set off _____ station & code _____	CODE _____ DATE _____	CK # _____ BANK NAME _____ BANK ADDRESS _____		

X Matt Fox CONSIGN

DELIVERY ACKNOWLEDGEMENT: All listed services were rendered and the property described has been received in apparent good condition except as noted on other shipping documents.

MATTHEW FORSBERG

ACTUAL DELIVERY DATE

NET WEIGHT	MILES	RATE	CHARGES	CODE
50	1377			
OTHER ACCESSORIALS-LIST	TYPE	QTY.		
LIFTGATE	LG			ORD

TOTAL CHARGES

CHARGES PAYABLE IN U.S. CURRENCY
OR ITS EQUIVALENT

Original - If charges are C.O.D., record collection, and give this

PAGE NO. NO. OF PAGES

VISUAL COPIER/SORTER INVENTORY



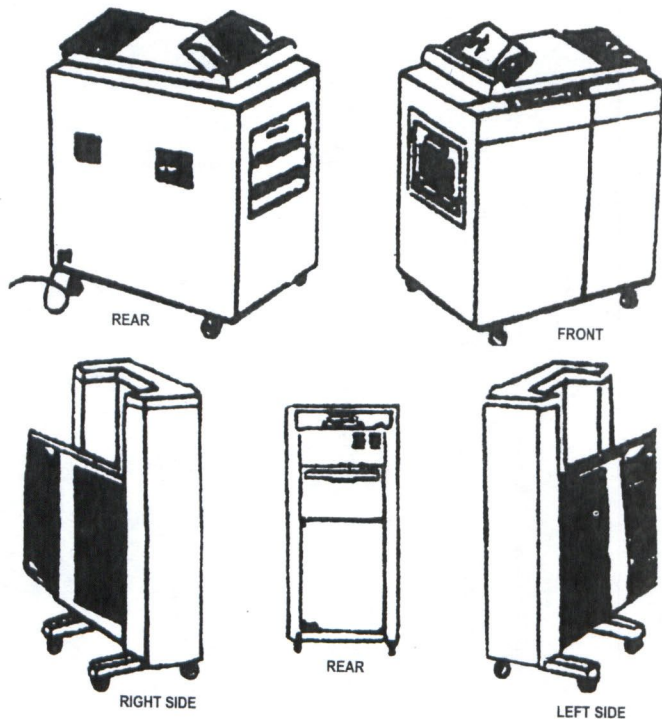
www.stidelivers.com

FIRST HAULER		HAULER CODE #	TRAILER #	CONTRACT
SHIPPER'S NAME				MAKE
ORIGIN LOADING ADDRESS		CITY	STATE	MODEL
DESTINATION				SERIAL
DESCRIPTIVE SYMBOLS CP - Packed By Carrier DBS - Disassembled By Shipper PBS - Packed By Shipper MCU - Mechanical Condition Unknown CD - Carrier Disassembled CU - Contents and Conditions Unknown		EXCEPTION SYMBOLS BE - Bent D - Dented M - Marred SO - Soiled BR - Broken F - Faded R - Rubbed T - Torn BU - Burned G - Gouged RU - Rusty W - Badly Worn CH - Chipped L - Loose SC - Scratched Z - Cracked		LOCATION SYMBOLS 1. Arm 5. Left 9. Side 2. Bottom 6. Leg 10. Top 3. Corner 7. Rear 11. Veneer 4. Front 8. Right 12. Edge 13. Center

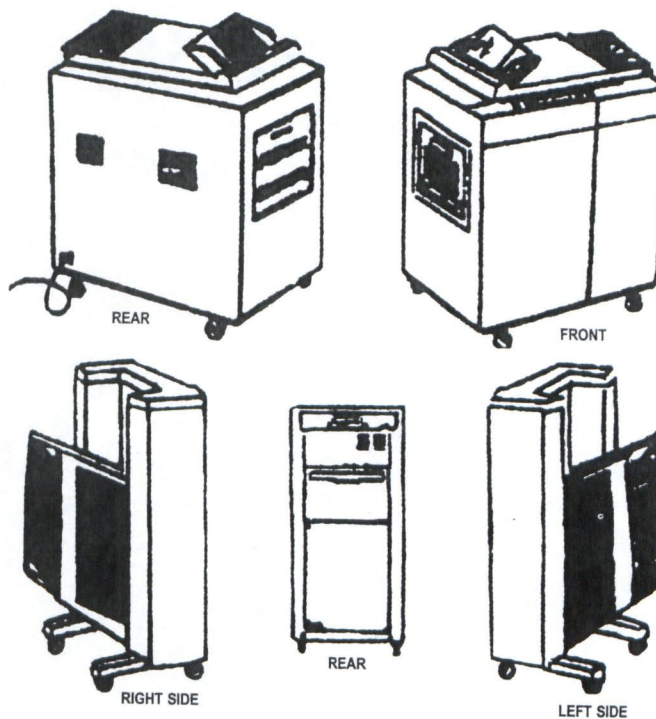
NOTE: The omission of these symbols indicates good condition for normal wear.

ITEM NO.	INVENTORY TRACKING NUMBERS	ITEM DESCRIPTION AND CONDITION	EXCEPTIONS (IF ANY) AT DESTINATION
	 011696712-B	<i>Packed In Box PBS, CU</i>	

ORIGIN CONDITION



INDICATE CHANGES (IF ANY) AT DESTINATION



if necessary, draw in appropriate configuration
 EEELED SORTERS & FINISHERS MUST BE
 ATTACHED BY SHIPPER

CONTRACTOR, CARRIER OR AUTHORIZED AGENT (DRIVER)

(Signature)

DATE

11/26

CONTRACTOR, CARRIER OR AUTHORIZED AGENT (DRIVER)

(Signature)

DATE

11/26

CONTRACTOR, CARRIER OR AUTHORIZED AGENT (DRIVER)

(Signature)

DATE

SHIPPER OR AUTHORIZED AGENT

(Signature)

DATE

ORIGINAL - SEND TO STI, P.O. BOX 80520, FORT WAYNE, IN 46898-0520 AFTER FINAL DELIVERY